

How to Talk Like a Healthcare Management Robot

*A field guide to saying nothing,
beautifully.*

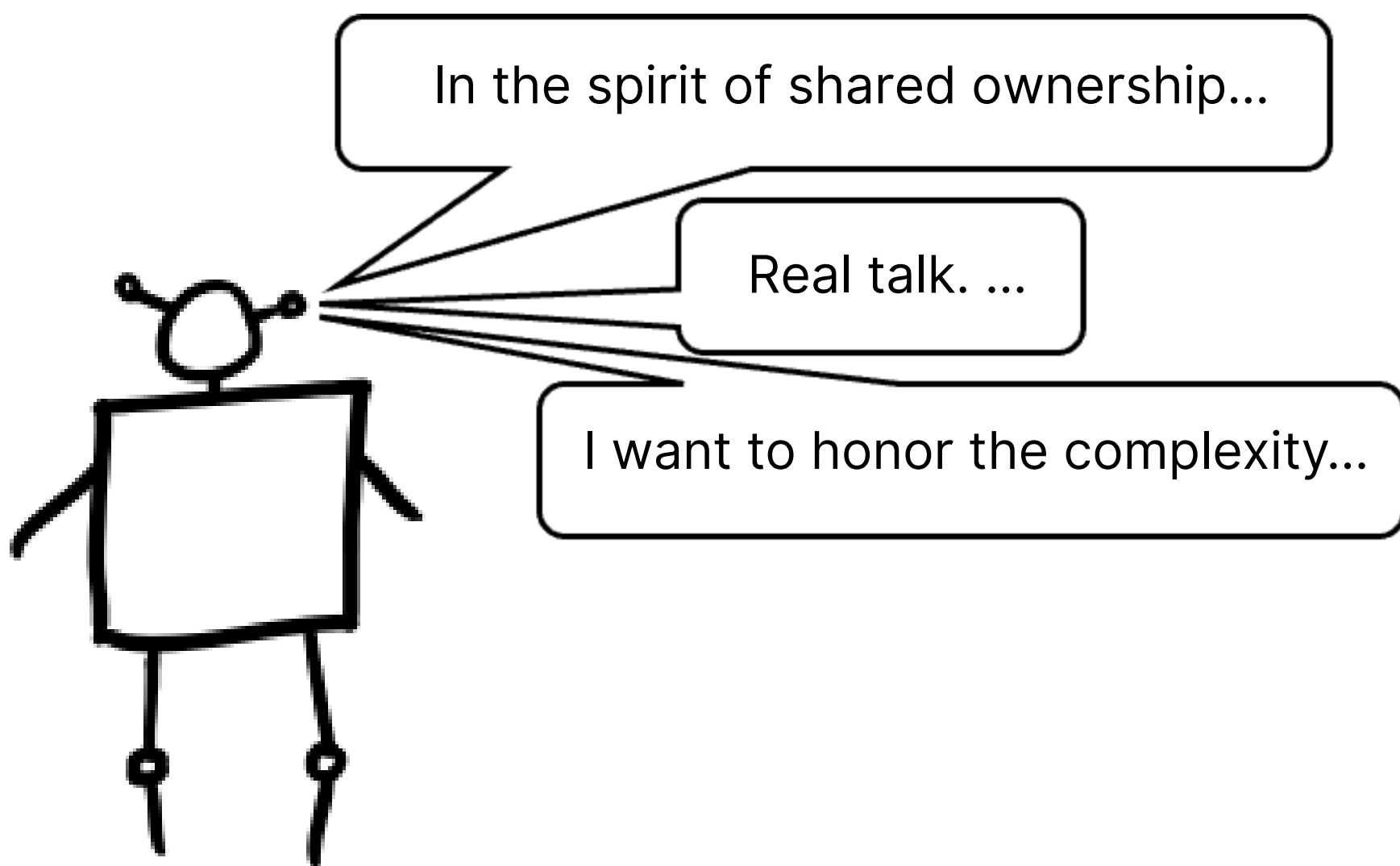


Richard Winters MD
You're the Leader.
Now What?

Step 1:

Establish **Human Vibes**.

Before you say nothing, sound like a friend.

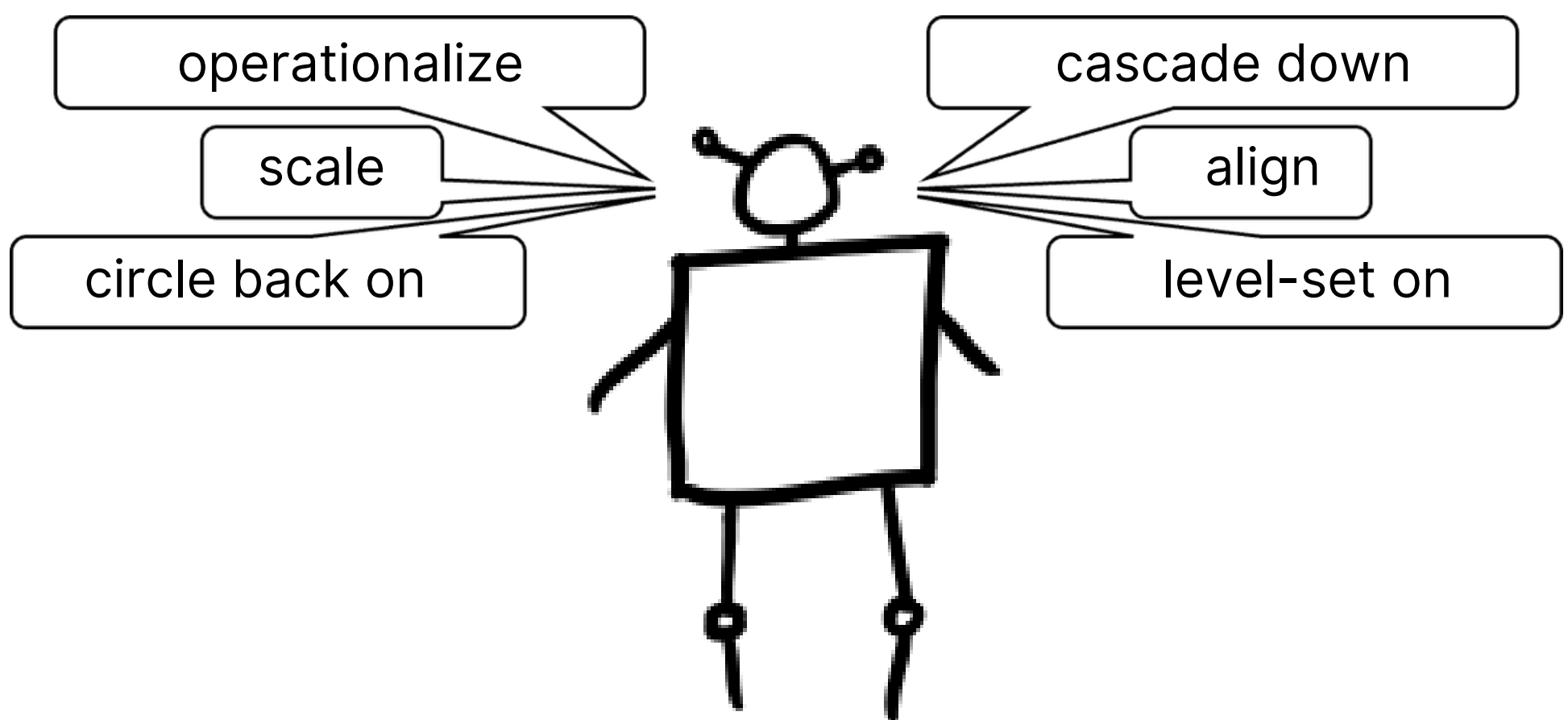


You want the room to **feel seen** before anyone notices **nothing** has been said. So you start with something that sounds **brave**. Your **friendliness** softens the **ambiguity**. You signal a little **vulnerability**, but you **don't reveal** anything. You're **building trust** before you **spend** it.

Step 2:

Replace “Do” with a **Power Verb**

The verb does most of the work.

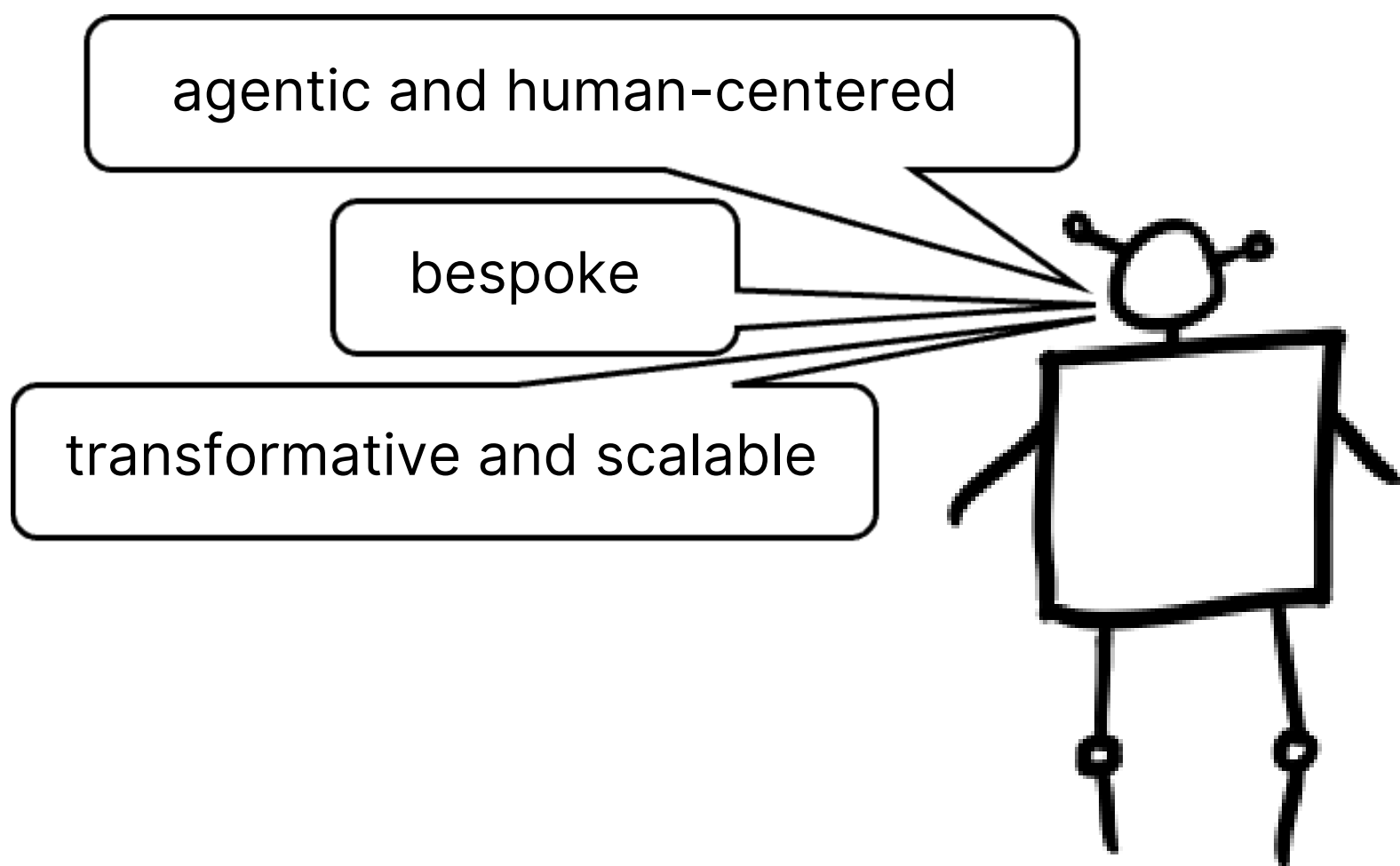


You don't want to **sound** like you're simply **doing work**. You want to sound like you're **transforming work**. So you operationalize, socialize, realign, leverage, right-size, and level-set. The more **abstract** the verb, the more **strategic** the sentence feels. **Actual movement** remains **optional**.

Step 3:

Add an **Expensive Adjective**.

Surround the ordinary work with bling.

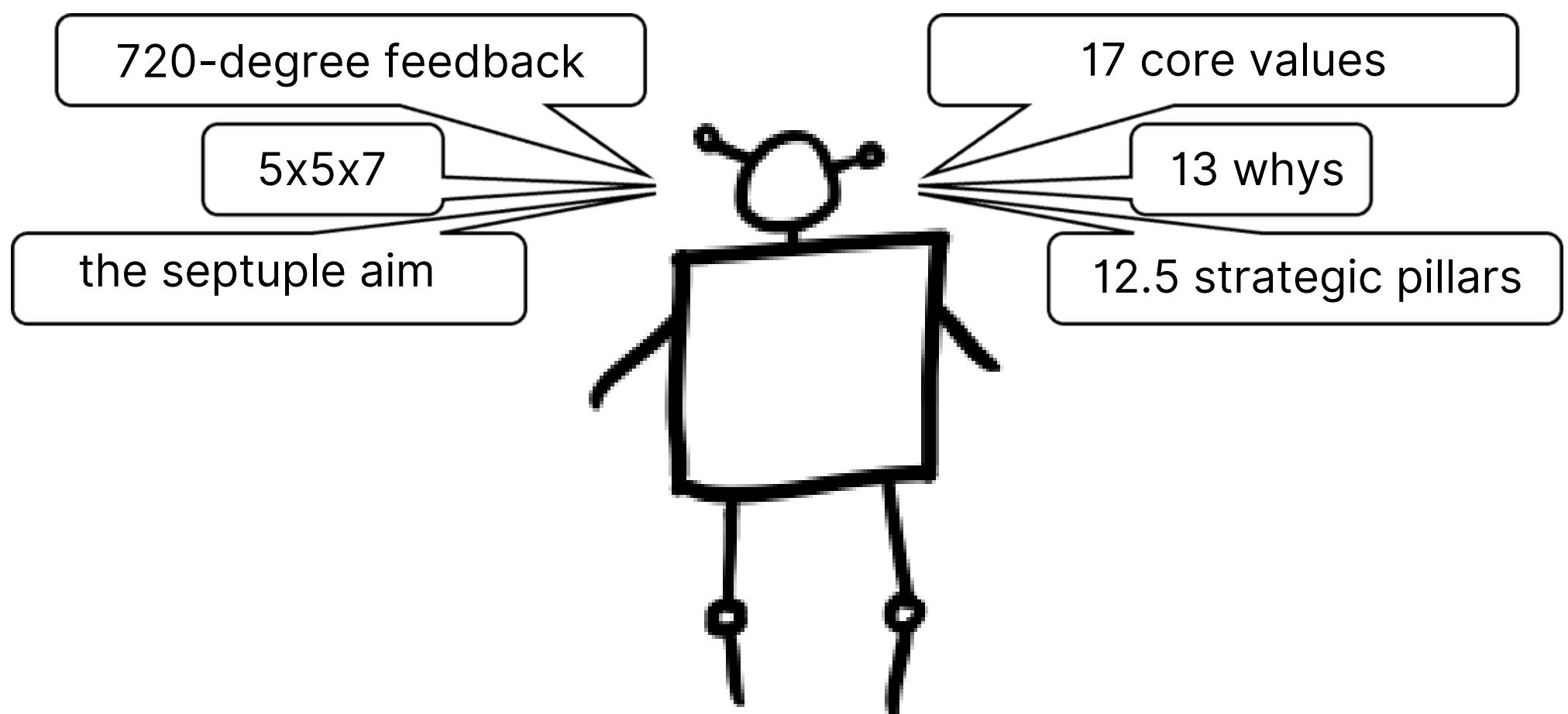


Now that the verb sounds **strategic**, the noun needs to **level up**. You **don't** talk about **care pathways**. You talk about **best-in-class** care pathways. You don't mention **staffing**. You mention **cross-functional FTE alignment**. The adjective doesn't **clarify** the work. It turns ordinary work into **strategy**.

Step 4:

Add Numbers

You're not serious until you quantify it.

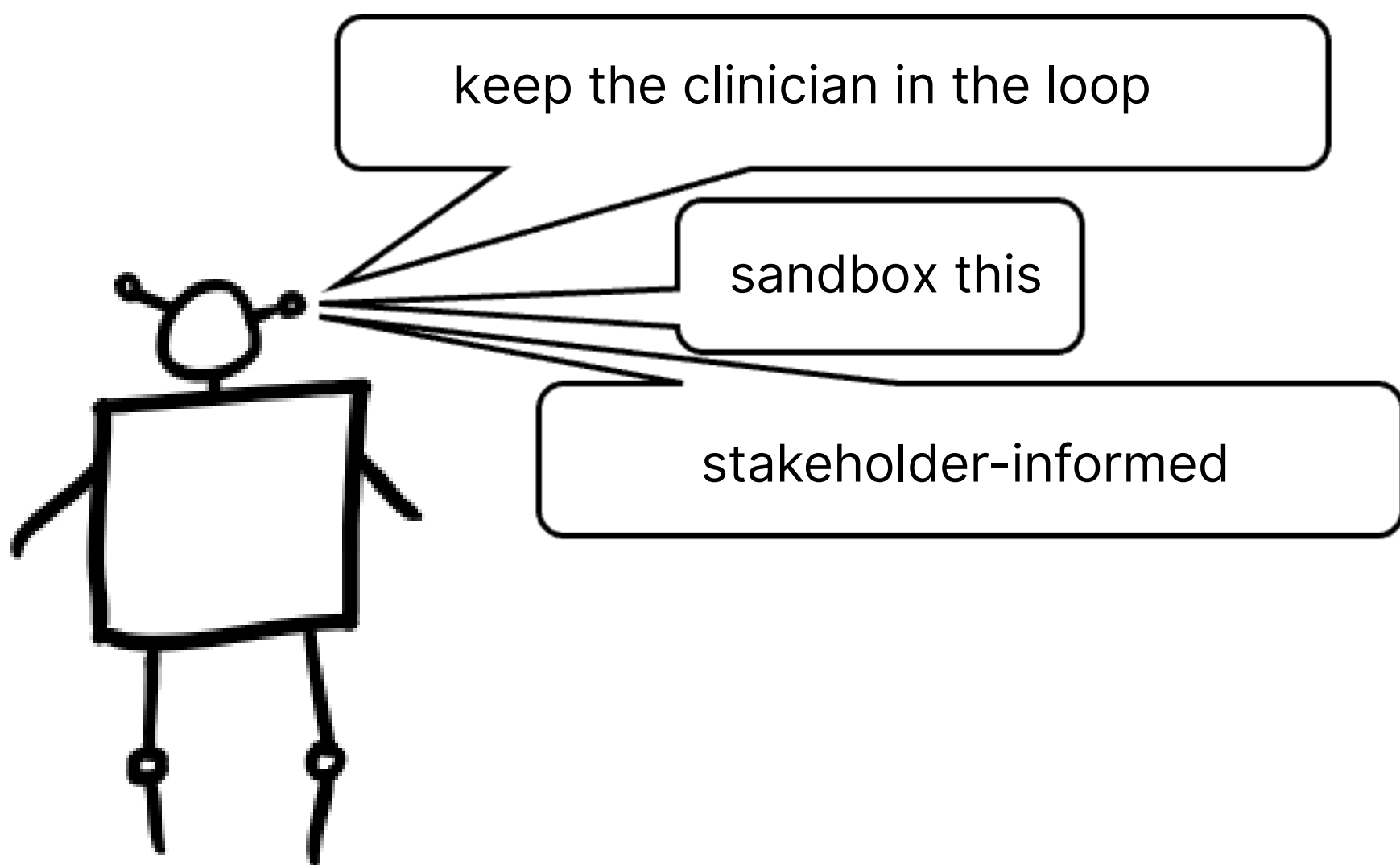


Now the **work** needs a **number**. Not because the number helps, but because it makes the sentence feel **serious**. You **don't** say we need better alignment. You say we **harness** our **17** core values, ask **13** Whys, and consider our **simple 5x5x7** matrix. The number gives the room something to **nod** at while everyone **forgets** to ask what it **means**.

Step 5:

Sound Responsible

Promise innovation and safety.



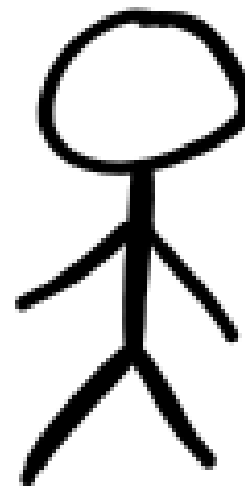
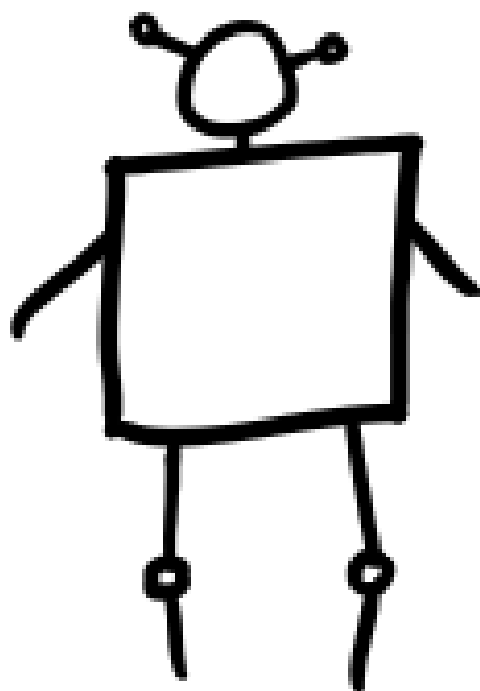
Now you need to **sound careful** without slowing down the **excitement**. So you promise innovation and safety at the same time. You'll sandbox this, keep the clinician in the loop, and stay behind the guardrails. **Nobody knows** what the guardrails are yet. That's okay. You've made the room **feel responsible**. And, importantly, you **haven't** made any decisions.

Step 6:

Put It to Work

Try it in the wild.

Yes, and thanks for flagging this. Going forward, we'll workshop our scalable care transitions, align on the 17 core values, and circle back once we've level-set at the 30,000-foot level.



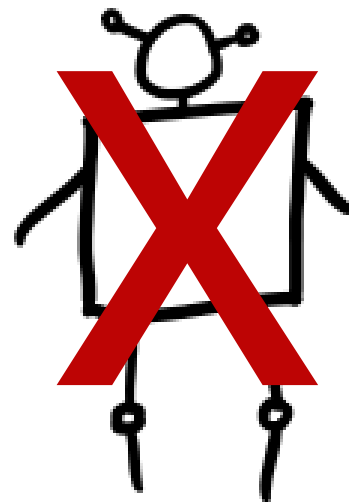
Final Step:

The Point

We laugh because we recognize it.

The **fix** is simple:

- Name the **real** problem.
- Name the **decision**.
- Name who **owns** it.
- Name when it will **happen**.



Be **specific**. Don't be a **robot**.

Say the **real thing**. Use your **human voice**.



Want to generate **your own robot language**?

I built a button for it:

<https://richardwinters.com/robot>